



## PUBLIC HEALTH CONNECTIONS

November – 2004 Volume 4, Issue 11

Office of Local and Rural Health

Roderick L. Bremby, Secretary

Kathleen Sebelius, Governor



### SAMUEL J. CRUMBINE MEDAL AWARDED



Doug Farmer, Assistant Secretary, KDHE and Shirley Orr

Shirley Orr, ARNP, MHS, CNA, Director of Local Health for the Office of Local and Rural Health, Kansas Department of Health and Environment, received the 2004 *Samuel J. Crumbine* award at the Kansas Public Health Conference on September 29. Shirley's responsibilities include oversight of state agency liaison activities with local agencies, including technical assistance and general infrastructure support for 99 local health departments serving 105 counties. She is also responsible for coordination of the state aid-to-local process within the Division of Health. In addition, she provides oversight of Public Health Workforce Development activities and the training component of the CDC Bioterrorism Preparedness Grant (Focus Area G). She has completed 13 years of service at KDHE, and has provided over 20 years of service in professional and administrative roles for public health and health care organizations in Kansas. Shirley currently serves as the Kansas and Midwest Regional representative to the Association of State and Territorial Directors of Nursing.

In addition, Shirley serves as Co-Executive Director of the Kansas Public Health Leadership Institute, and is a founding partner in the Kansas WALD

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(Workforce and Leadership Development) partnership. She also serves as adjunct faculty of the Department of Preventive Medicine and Public Health at the University of Kansas School of Medicine-Wichita. CONGRATULATIONS!!

### HEART OF HEALTHCARE AWARD



Mitzi Hesser, RN, Administrator of Kiowa County Public Health Department, Greensburg, was one of ten registered nurses to receive the Nursing: "Heart of Healthcare Award." The 14<sup>th</sup> Annual Nursing: The Heart of Healthcare Awards banquet honored ten registered nurses on October 22, at the Westin Crown Center Hotel, Kansas City, MO. The University of Kansas School of Nursing coordinated the event with the reception sponsored

by Siemens Medical Solutions, one of the largest suppliers of health care equipment in the world. The program's emcee was Larry Moore, KMBC-TV9 news anchor.

The event recognized outstanding registered nurses in Kansas and the Greater Kansas City area and had 500 people in attendance. There were ten award winners from more than 400 nominations. The University of Kansas established ***Nursing: The Heart of Healthcare*** in 1989 to recognize registered nurses' contributions to their communities, patients and profession. Over the past 14 years, there have been more than 140 winners and more than 5,500 nominations for the award. Nominations are accepted from patients, patient's family, colleagues, employers, supervisors and the nurse's family and friends. A selection committee, composed of former award winners, health care and business leaders, selected the ten winners. Every nurse who was nominated received a certificate of recognition.

### **SLEEP TIGHT DON'T LET THE BED BUGS BITE!**

*by Janis Goedeke, ARNP, Health Officer  
Crawford County Health Department*

"Sleep tight—don't let the bed bugs bite," took on a whole new meaning in Crawford County this summer. On August 24, the Health Department took the first phone call from a day care reporting they had several children with bug bites. Approximately two days later, the Health Department received a phone call from a physician stating there seemed to be a problem at Pittsburg State University as students were getting bit by some type of bug. Remarkably, everyone was giving the same history. They did not see the bug that bit them, they did not feel the bug bite them and they usually woke up with the bites believing that they had been bitten while they were sleeping. The bites were distributed mainly on the torso, and many residents

were wearing "necklaces" of bites around their necks. (Some people would have as many as 30-40 bites on their bodies) Traps were unsuccessful at trapping the mysterious bugs. Since no bug could be identified as the culprit in the samples that were being sent to Kansas State University, Dr. Gail Han-



sen, DVM, MPH, Director and Assistant Deputy State Epidemiologist, KDHE, then requested epidemiology assistance from the CDC. The KDHE and CDC investigative team arrived and they began making a surveillance sheet. A team arrived from Kansas State University to set more traps for the mysterious culprit to no avail. CDC and KDHE staff noticed that the entire talk of the town was of nothing but the mysterious bugs! It was more difficult to find someone who had not been bitten than someone who had been bitten. The Health Department then received a phone call from Lincoln, Nebraska whose community was having a similar problem. Both the University of Nebraska and the Kansas State University began to work together to solve the problem. It was determined that due to the location of the bites they were very likely airborne, or coming from trees. It was then decided to gather leaves from pin oak trees as they seemed to have a more than usual number of galls on their leaves. After collecting leaves from the hot zones in the county KSU confirmed that the culprit was the Pyemotes mite (straw itch mite). Kansas State University has sent samples of the galls and mites to Florida for positive identification, and the results are still pending at this time.

Through the shoe leather epidemiology, many residents revealed they thought they had bed bugs. So it is possible that the bugs were biting quite some time before they were being reported as no one wanted to admit that they might have bed bugs!

Now that the culprit had been identified as the straw itch mite and the data had been gathered, the CDC epidemiologists returned home proudly bearing their contribution to science as they also had been bitten. The residents of Crawford County were once again tucked into bed without the fear of being bitten by what they thought were bed bugs, but indeed was the straw itch mite

#### **Lessons Learned:**

- Increase technology: phone lines, internet access, computers, and jump drives
- Need to be sure that the phone trunk is adequate for the number of lines needed
- Feed the media
- **MOST IMPORTANTLY: LIFE GOES ON!**  
Other programs must continue

A special thanks to Dr. Gail Hansen, Dr. Candace Taylor, David Stuever, Daniel Neises, Amanda Hodle, Jon Anderson, Dr. David Gordon, Pittsburg, State University, Jacob Weber, Kansas State Extension horticulturist, for their assistance, to Fuy Yen y Yip, Dr. Azziz Baumgartner and Helen Branswell from the CDC, Dr. Zurek and Dr. Broce from KSU, and the Lower Eight Bioterrorism Region. As this

story only gives you a small sampling of the investigation, we are certain to have future presentations on the Pyemotes mite.

**\*Editor's Note:** Since this writing further investigation has found the organism involved to be the Pyemotes herfsi mite. Cal Wellbourn, an entomologist in the Division of Plant Industry at the Florida Department of Agriculture and Consumer Services in Gainesville, identified the mite as Pyemotes herfsi, a species from Central Europe where it feeds on larvae of various moth species. This is the first time the presence of this particular species of itch mite has been confirmed in North America.

### NURSES HONORED



Pictured Carolyn Dove (left) and Dixie Broadhurst (right).

A reception and luncheon was held on Monday, October 11 at the City-Cowley County Health Department in honor of Dixie Broadhurst and Carolyn Dove. Dixie Broadhurst has been a nurse with the health department for 26 years and is retiring at the end of October. Carolyn Dove has been a nurse with the health department for 30 years. Both women were presented awards in recognition of their many years of dedicated service to the health of Cowley County citizens. Their family members joined health department board members, along with former and current health department employees in congratulating these two women on their accomplishments.

### REGIONAL PUBLIC HEALTH MEETINGS

**Central Region:** Meetings are held at the Reno County Health Department from 10 a.m. – 3 p.m. Please contact Debbie Whitmer at 785-827-9639 if you have any questions. Dates are:

December 8 Hutchinson

**North Central Region:** Meetings are held from 9 a.m.-3 p.m. Please contact Debbie Whitmer at 785-827-9639 if you have any questions. Dates and locations are:

December 7 Abilene

**Northeast Region:** Meetings are held at the Curtis State Office Building, 1000 SW Jackson, Azure Conference Room, 4th Floor, Topeka, from 10 a.m.-3 p.m. Please contact Anita Hodge at 785-368-8110 or Jon Anderson at 620-431-2390 if you have any questions. Dates are:

December 9 Topeka

**Northwest Region:** Meetings are held from 10 a.m.-3 p.m. at the NW Educational Service Center in Oakley. Please contact Debbie Whitmer at 785-827-9639 if you have any questions. Date is:

December 9 Oakley

**Southeast Region:** Meetings are held from 10 a.m.-3 p.m. at the Meadowlark Room at the Southeast District Office, located at 1500 West 7th Street in Chanute. Please contact Jon Anderson at 620-431-2390 if you have any questions. Date is:

November 18 Chanute

**Southwest Region:** Meetings are held from 9 a.m.-3 p.m. in Garden City. Location to be announced. Dates are:

November 19 Garden City

### NEW BRIEFS PHClinic Project

*by Pete Kitch*

It has been a busy fall for the PHClinic project in Kansas. After careful planning we have migrated our database from Version 8.3 to 9.1, and the application to Version 5.0. The new database engine enhances our coding productivity and development tool set. One of the major advantages is Open Data Base Connectivity (ODBC) to our database, which allows the use of a wide variety of software products for query and reporting functions. For example, one of our partners has migrated the basic client and service files to an Structured Query Language (SQL) environment and has created their own additional reports. In the original Kansas implementation we had to visit each site but with the acquisition of new technology we have been able to migrate each site without the need for a site visit.

We continue to enhance the billing functionality. We recently made modifications to Roster Clinics to allow for quick entry of one procedure with billing; the change will speed up entry of the flu shots they do have to give. Health departments are now able to use PHClinic to create batch claims files for billing HCBS services to MAP, have changed the sliding fee scale to accommodate the income verification process for the Senior Care Act program, and currently working on changes that will make the





ongoing Medicaid recoupments easier to post and track. Finally, we are working with ASK to test WebMD changes on Firstguard production claims.

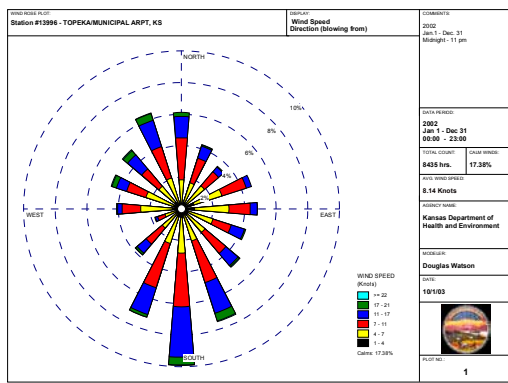
Work continues on the development of the Kansas disease protocols. Thirty are complete, seven are being reviewed by KDHE, and the remaining 15 are under development. The diseases currently in review at KDHE include: Diphtheria, Yellow Fever, Leprosy, Bacterial Meningitis, Meningococemia and Trichinosis. We have also been asked to develop "on-line" training for the protocols that will be available through the KS-Train and KDHE.

### Kansas Weather and Air Quality

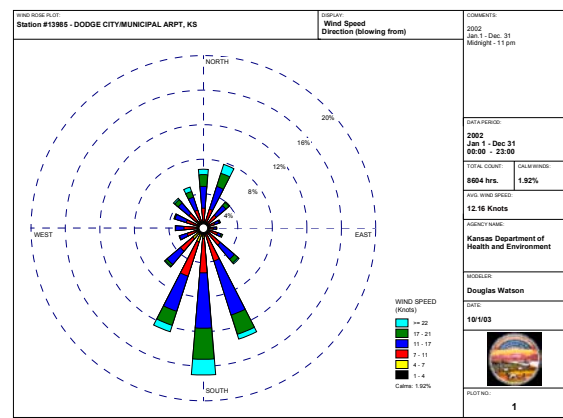
*by Douglas Watson, Meteorologist  
KDHE, Bureau of Air & Radiation*

Kansans experience four distinct seasons because of the state's geographical location in the middle of the country. Cold winters and hot, dry summers are the norms for the state. The other constant in Kansas weather is the wind. Kansas ranks high in the nation in average daily wind speed. In 2003, the average wind speed across the state was a little over 11 miles per hour (m.p.h.). The predominant wind direction was from the south. The two wind roses represented in figures 1 and 2 show wind speed and direction from National Weather Service sites in Dodge City and Topeka. Each "petal" of the wind rose shows the predominant direction from which the wind is blowing. These factors combine to affect the two major areas of air quality concern in the state, ozone and particulate matter.

The air pollution meteorology problem is a two-way street. The presence of pollution in the atmosphere may affect the weather and climate. At the same time, the meteorological conditions greatly affect the concentration of pollutants at a particular location, as well as the rate of dispersion of pollutants.



The ground-level ozone or smog problem develops in Kansas during the period from April through October. Ozone is formed readily in the atmosphere by the reaction of volatile organic compounds (VOCs) and oxides of nitrogen ( $\text{NO}_x$ ) in the presence of heat and sunlight, which are most abundant in the summer months. Kansas tends to experience ozone episodes in the summer, especially in the large metropolitan areas, when high pressure systems stagnate over the area, which leads to cloudless skies, high temperatures and light winds. Another element of these high pressure systems that contributes to pollution problems is the development of upper air inversions. This will typically "cap" the atmosphere above the surface and not allow the air to mix and disperse pollutants. Therefore, pollution concentrations may continue to increase near the ground from numerous pollution sources since the air is not mixing within and above the inversion layer.



The other pollutant of concern mentioned earlier is particulate matter. Kansas has a long history of particulate matter (PM) problems caused by our weather. The Great Dust Bowl of the 1930s was caused, in part, by many months of minimal rainfall and high winds. This natural source of PM pollution, although not as bad as in the 1930s, is still a concern today as varying weather conditions across the state from year to year cause soil to be carried into the air and create health problems for citizens of Kansas.

Another source of PM pollution is anthropogenic, generated by processes that have been initiated by humans. These particles may be emitted directly by a source or formed in the atmosphere by the transformation of gaseous emissions such as sulfur dioxide ( $\text{SO}_2$ ) and  $\text{NO}_x$ . Meteorological conditions also affect how these man-made sources of PM form and disperse. One factor that is common in Kansas that can lead to high pollution episodes is a surface

inversion. Like upper air inversions, warmer air just above the surface of the earth forms a surface inversion and caps pollutants below it. These inversions are mainly caused by the faster loss of heat from the surface than the air directly above it. In Kansas, surface inversions are more common in the winter months, but can occur during any season and lead to pollution problems.

### Carbon Monoxide Poisoning



Carbon monoxide, or CO, is an odorless, colorless gas that can cause sudden illness and death. Carbon monoxide is found in combustion fumes, such as those produced by cars and trucks, small gasoline engines, stoves, lanterns,

burning charcoal and wood, gas ranges and heating systems. Carbon monoxide from these sources can build up in enclosed or semi-enclosed spaces. Breathing it can poison people and animals in these spaces. The most common symptoms of carbon monoxide poisoning are headache, dizziness, weakness, nausea, vomiting, chest pain, and confusion. High levels of carbon monoxide ingestion can cause loss of consciousness and death. Unless suspected, carbon monoxide poisoning can be difficult to diagnose because the symptoms mimic other illnesses. People who are sleeping or intoxicated can die from carbon monoxide poisoning before ever experiencing symptoms. All people and animals are at risk for carbon monoxide poisoning. Certain groups - unborn babies, infants, and people with chronic heart disease, anemia, or respiratory problems, are more susceptible to its effects. Each year, more than 500 Americans die from unintentional carbon monoxide poisoning, and more than 2,000 commit suicide by intentionally poisoning themselves.

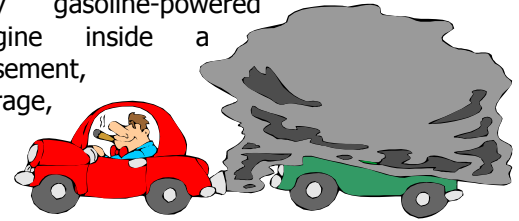
You can prevent carbon monoxide poisoning by taking simple precautions to make sure that:

- All fuel-burning appliances are properly installed, maintained, and operated.
- A qualified service technician inspects furnaces, water heaters, and gas dryers annually.
- Fireplace chimneys and flues are checked and cleaned every year.
- Unvented fuel-burning space heaters are used only while someone is awake to monitor them and doors or windows in the room are open to provide fresh air.
- Automobile exhaust systems are routinely inspected for defects.

- Automobile tailpipes are routinely inspected for blockage by snow during the winter months.

### REMEMBER:

- Never use a gas range or oven to heat a home.
- Never use a charcoal grill, hibachi, lantern, or portable camping stove inside a home, tent or camper.
- Never run a generator, pressure washer, or any gasoline-powered engine inside a basement, garage, or

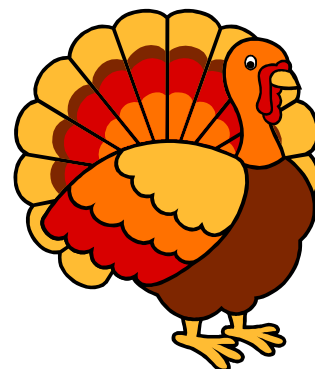


other enclosed structure, even if the doors or windows are open, unless the equipment is professionally installed and vented.

- Never run a motor vehicle, generator, pressure washer, or any gasoline-powered engine outside of an open window or door where exhaust can vent into an enclosed area.
- Never leave the motor running in a vehicle parked in an enclosed or semi-enclosed space, such as a closed garage.

Knowledge is the key to preventing carbon monoxide poisoning. In most cases of unintentional poisonings, victims did not realize that carbon monoxide was being produced or building up in the air they were breathing. Carbon monoxide can be easily and cheaply detected in the home; several relatively inexpensive carbon monoxide alarms are available. Consider placing a carbon monoxide alarm on each level of your home and in your bedrooms. For more information go to the CDC Web-site

<http://www.cdc.gov/nceh/airpollution/carbonmonoxide/cofaq.htm>



## KSFHP Health Promoters and Friends at the Sublette Health Fair



From left to right: Tina Guenther, Lena Dyck, Sara Frieson, Helen Loewen and Lisa Loewen. Tina, Lena, and Helen are Health Promoters serving Western Kansas.

The Kansas Statewide Farmworker Health Program (KSFHP) assisted over 2900 farmworkers and family members to access health care services last year. With a new and growing number of Low German speaking, Mexican Mennonites coming to Kansas to work in agriculture, KSFHP was challenged to meet the needs of this group. A health needs survey, completed in 2003, showed this group demonstrated a lack of information or experience with the traditional health care system. Further challenges were in the area of communication since Low German is not typically a written language, and few of the Mexican Mennonites had written fluency in any language. As a result, KSFHP partnered with the Western District Conference, Mennonite Church USA to address the needs of this population. A pilot program was started using bilingual (English/Low German) women who grew up in the Mexican Mennonite communities to work as health promoters. The pilot was a great success.

In order to have on-going support for the health promoters and to address KSFHP's annual shortfall of voucher dollars to meet the primary care service needs of farmworkers, KSFHP submitted a Medical Expansion application to the U.S. Department of Health and Human Services. This application was awarded August 2003. This increase to the annual grant will allow KSFHP to:

- Formalize and provide on-going support for the three part-time Low German/English speaking Health Promoters in Western Kansas.
- Record already developed health education transcripts in three languages; Low German/Spanish/English and distribute them to farmworkers and health providers.

- Hire a new Regional Case Manager and adjust the half-time Program Manager to a full-time position.
- Stabilize funding throughout the year for vouchers that pay for health services for farmworkers.
- Encourage and support farmworkers in seeking preventive health services at increased numbers.

We are very excited about our ability to improve our services through the grant and appreciate all of the health agencies and providers who have partnered with us over the past ten years to serve farmworkers in Kansas.

## Hantavirus Pulmonary Syndrome



Hantavirus pulmonary syndrome (HPS) is a deadly disease transmitted by infected rodents through urine, droppings, or

saliva. Humans can contract the disease when they breathe in aerosolized virus. Rodent control in and around the home remains the primary strategy for preventing hantavirus infection. Through September 1 a total of 379 cases of hantavirus pulmonary syndrome have been reported in the United States. In North America, the deer mouse, the white-footed mouse, the rice rat, and the cotton rat can give people hantaviruses that cause HPS. However, not every deer mouse, white-footed mouse, rice rat, or cotton rat carries a hantavirus. Other rodents, such as house mice, roof rats, and Norway rats, have never been known to give people HPS. Because it is hard to tell if a mouse or a rat carries a hantavirus, it is best to avoid all wild mice and rats and to safely clean up any rodent urine, droppings, or nests in your home. Dogs and cats cannot give people hantavirus infections.

People get HPs when they breath in hantaviruses. This can happen when rodent urine and droppings that contain a hantavirus are stirred up into the air. People can also become infected when they touch mouse or rat urine, droppings, or nesting materials that contain the virus and then touch their eyes, nose, or mouth. They can also get HPS from a mouse or rat bite. Here are some activities that can put people at risk for HPS:

- Improperly cleaning up mouse and rat urine, droppings, and nests.
- Cleaning a shed or cabin that has been closed for some time.

- Working in areas where mice and rats may live (such as barns).

In the United States, there has never been a case in which a person with HPS has given the disease to another person. For more information about Hantavirus Pulmonary Syndrome go to <http://www.cdc.gov/ncidod/diseases/hanta/hps/index.htm>

### **OCTOBER IS NATIONAL Breast Cancer Awareness Month!**



Many deaths from breast and cervical cancers could be avoided by increasing cancer screening rates among women at risk. Deaths from these diseases occur disproportionately among women who are uninsured or underinsured. Mammography and Papanicolaou (Pap) tests are underused by women who have no source, or no regular source of healthcare, women without health insurance; and women who immigrated to the United States within the last 10 years. Studies show that early detection of breast and cervical cancers saves lives. Timely mammography screening among women 40 years or older could reduce breast cancer mortality by approximately 16 percent compared with women who are not screened. A pap test can find cervical cancer at an early stage when it is most curable or even prevent the disease if precancerous lesions found during the test are treated. Mammography is the best available method to detect breast cancer in its earliest, most treatable stage – an average of one to four years before a woman can feel a lump. Cervical cancer screening using the Pap test detects not only cancer but also precancerous lesions. Women should begin getting a Pap test with the start of sexual activity, but no later than age 18.

#### **FACTS ABOUT BREAST AND CERVICAL CANCER BREAST CANCER**

- ❖ Except for skin cancer, breast cancer is the most commonly diagnosed cancer among American women.
- ❖ It is second to lung cancer as the leading cause of cancer-related deaths among women.
- ❖ In 2004, an estimated 215,990 new cases of invasive breast cancer will be diagnosed.
- ❖ In 2004, an estimated 40,580 women will die of this disease.
- ❖ Seventy-five percent of all diagnosed cases of breast cancer are among women 50 years or older.

#### **CERVICAL CANCER**

- ❖ The incidence of invasive cervical cancer has decreased significantly over the last 40 years, in large part because of screening for, and treatment of, precancerous cervical lesions.
- ❖ In 2004, an estimated 10,520 new cases will be diagnosed.
- ❖ In 2004, an estimated 3,900 women will die of this disease.
- ❖ Routine screening for cervical cancer can prevent most occurrences of this disease.

Additional information on screening for breast and cervical cancer can be found at: <http://www.cdc.gov/cancer/nbccedp/about2004.htm>  
<http://www.kdhe.state.ks.us/edw/index.html>

### **TRAININGS**

#### **Medical Interpreter Training Schedule 2004-05**



Medical interpreter training is 40 hours of intensive, interactive learning for bilingual participants. The projected outcomes are to train qualified bilingual individuals in medical/social service interpreting and to provide educational training to medical and social service providers on their legal obligations to provide language assistance to limited or non-English speaking clients.

#### **Northeast Kansas**

Lawrence Memorial Hospital  
325 Maine, Lawrence  
Room "D" Nov. 4-5 - Room "A" Nov. 10-12  
8:00 a.m. to 5:00 p.m.



#### **Central Kansas**

Newman Regional Health  
1201 W 12<sup>th</sup>, Emporia  
December 2-3 & 8-10 from 8 a.m. to 5:00 p.m.

#### **North Central Kansas**

Mercy Regional Health Center  
1823 College Ave, Manhattan  
February 10-11 & 16-18, 2005 from 8:00 a.m. to 5:00 p.m.

#### **Southwest Kansas**

1710 Palace Drive, Garden City  
Area SRS Building  
April 18 - 22, 2005 from 8:00 a.m.- 5:00 p.m.



## South Central Kansas

University of Kansas School of Medicine - Wichita  
1010 N. Kansas, Wichita  
Sunflower Room 2202  
June 6–10, 2005 from 8:00 a.m.-5:00 p.m.

For more information/or registration please contact Cathy Anderson at Jewish Vocational Service (JVS), 1608 Baltimore, Kansas City, MO 64108 or call 816-471-2808 ext. 142, or e-mail Cathy at [canders@jvskc.org](mailto:canders@jvskc.org). You may also contact Brandi Miller at [bmiller@jvskc.org](mailto:bmiller@jvskc.org).

## Cultural Competency Training Schedule 2004-05

Cultural competency training will provide participants an opportunity to learn how to effectively communicate with limited English-proficient clients, collaborate with families and coordinate services. The topics covered will include: Dimensions of Diversity, Working Effectively with Interpreters, and Building Culturally Competent Community Partnerships. Participants do not have to be bilingual to take this 16-hour training.



**Pittsburg** - January 25 -26, 2005 from 8:00 a.m.-5:00 p.m.  
Pittsburg Municipal Auditorium  
503 N. Pine, Pittsburg

**Wichita** - February 22-23, 2005 from 8:00 a.m.-5:00 p.m.  
University of Kansas School of Medicine - Wichita  
1010 N. Kansas, Sunflower Room, Wichita

**Hays** - March 21-22, 2005 from 8:00 a.m. - 5:00 p.m.  
Fort Hays State University  
600 Park Street, Fort Hays  
Memorial Union, College Drive, Trails Room

**Salina** - March 23-24, 2005 from 8:00 a.m. – 5:00 p.m.  
Catholic Charities  
425 W. Iron, Salina  
Board Room

**Dodge City** - April 14-15, 2005 from 8:00 a.m.-5:00 p.m.  
Western Plains Medical Complex  
108 Ross Blvd., Dodge City  
Classroom located at the Annex Building (across from the hospital)

For more information/or registration please contact Cathy Anderson at Jewish Vocational Service (JVS), 1608 Baltimore, Kansas City, MO 64108 or call 816-471-2808 ext. 142, or e-mail her at [canders@jvskc.org](mailto:canders@jvskc.org). You may also contact Brandi Miller, [bmiller@jvskc.org](mailto:bmiller@jvskc.org).

## Billing Workshops



**NE Billing Group**, November 4 from 9:00 a.m. to noon, Curtis Building, Azure Conference Room, Topeka

**NC Billing Group**, December 1 from 9:00 a.m. – noon, County Emergency Building, Lincoln

**NW Billing Group**, November 30 from 9:00 a.m. – noon, Decatur County Health Dept., Oberlin

**SC Billing Group**, November 18 from 9:00 a.m. – noon, Reno County Health Department, Hutchinson

**SE Billing Group**, December 21 from 9:00 a.m. – noon, District Office, Chanute

**SW Billing Group**, November 12 from 9: a.m. – noon, Satanta Bank, Satanta

## ITEMS OF INTEREST

**Flu Planning. Tick-Tock: Preparing for the Next Influenza Pandemic.** Eileen Salinsky. National Health Policy Forum Background Paper. August 27, 2004

[http://www.nhpf.org/pdfs\\_bp/BP%5FPandemicFlu%5F08%2D27%2D04%2Epdf](http://www.nhpf.org/pdfs_bp/BP%5FPandemicFlu%5F08%2D27%2D04%2Epdf)

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Region I ATSDR has created a **PDA Version of the 2004 Emergency Response Guide**. (Thanks to LTCDR Gary D. Perlman, US Public Health Service, for providing this product)

PDA version and PDF versions are available through the RI Dpt of Health web site at the following link:  
<http://www.health.ri.gov/environment/biot/responsguide.php>

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**What You Should Do to Prepare for and Respond to Chemical, Radiological, Nuclear, and Biological Terrorist Attacks.** Pocket Edition Survival Guide. RAND Corporation. 2004.  
<http://www.rand.org/publications/MR/MR1731.2/>

Survival At Your Fingertips: RAND Issues Pocket-Edition Terrorism Survival Guides - Downloadable for PDAs, Home Printers .



The RAND Corporation is making available two pocket guides designed to arm individuals with the knowledge to identify and survive various types of unconventional terrorist attacks. The guides are based on strategies RAND first outlined in a report last year and include a single-sheet, foldable reference card and a downloadable personal digital assistant (PDA) program.

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**Grants.gov** allows organizations to electronically find and apply for competitive grant opportunities from all Federal grant-making agencies. Grants.gov is THE single access point for over 900 grant programs offered by the 26 Federal grant-making agencies. <http://www.grants.gov/>  
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**"Community-Based Mass Prophylaxis: A Planning Guide for Public Health Preparedness."**

The Agency for Healthcare Research and Quality (AHRQ). August 2004.

<http://www.ahrq.gov/research/cbmprophy/cbmpro.htm>

### GENERAL WORKSHOPS

Continuing Education of interest to Public Health Workforce is listed by the Kansas State Board of Nursing at: <http://www.ksbn.org/cne/cnemain.htm>

**Kansas Division of Emergency Management:**

<http://www.accesskansas.org/kdem/trainingnew.htm>



### Public Health Training Network Satellite Downlinks/Webcasts

See PHTN Web site at <http://www.phppo.cdc.gov/phtn/default.asp> to view a complete list of satellite downlinks and webcasts. Call Linda Frazier, Distance Learning Coordinator at (785) 625-5663 if you need assistance.



## November 2004

**11/17/04**  
1:00 PM -  
2:00 PM  
CT

The National Terrorism Preparedness Institute presents:

**"Live Response: Coordinating Local WMD Training"**

(Note, this program was originally scheduled for September, but was postponed due to Hurricane Jeanne)

For more information and registration, contact Ed Kronholm at (877-820-0305) or visit: ["Coordinating Local WMD Training"](#)

**11/16/04**  
12:00 PM -  
1:30 PM  
CT

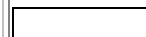
**Modeling for Bioterrorism Vaccines (SCCPH)**

For more information, contact Video Communications at the Alabama Department of Public Health at (334) 206-5618 or visit <http://www.adph.org/alphntn>.

**CDC**  
**11/18/04**  
12:00 PM -  
2:00 PM  
CST

**Rapid Testing: Advances for HIV Prevention**

[View](#) course overview.



For more information, visit <http://www.cdcnpin-broadcast.org> and by CDC Fax System at 888-CDC-FAXX (or 877-232-1010 for the hearing impaired) and enter document #130042 when prompted.



### Area Health Education Centers

AHECs

Look for AHEC's web page at <http://kuahec.kumc.edu> or trainings at <http://www.kdhe.state.ks.us> under the "Additional PH Training Calendar"

**NW Kansas** – Register or call at 785-628-6128

**SW Kansas** – Register or call at 620-275-0259

**SE Kansas** – Register or call at 620-235-4040

### To Order Tapes/CD's:

**Public Health Foundation Online Bookstore:**

<http://bookstore.phf.org/cat20.htm>

**CDC BT programs:**

<http://www.bt.cdc.gov/training/index.asp>

### Nursing Education

**Ft. Hays Nursing:** <http://www.fhsu.edu/nursing>

**KU Nursing:** KU has an on-line RN to BSN completion program:

[http://www2.kumc.edu/son/vclassroom/rn\\_to\\_bsn.htm](http://www2.kumc.edu/son/vclassroom/rn_to_bsn.htm)

**Wichita State University:** on-line RN to BSN:

[http://webs.wichita.edu/?u=chp\\_nurs&p=/rntobsnhomepage/](http://webs.wichita.edu/?u=chp_nurs&p=/rntobsnhomepage/)

**Washburn PHN Certification Program-**

<http://www.washburn.edu/sonu> or e-mail Dr. Janice Dunwell at: [zzdnwl@washburn.edu](mailto:zzdnwl@washburn.edu)

**ANA's Web site:** <http://www.RNCE.org>

**Other Continuing Education Online**

**The WALD CENTER:** <http://www.waldcenter.org>

**The Public Health Training Network:**

<http://www.phppo.cdc.gov/phtn/default.asp>

**KDHE/KALHD Training Calendars:**

<http://phtc.calendarhost.com/cgi-bin/calweb/calweb.cgi>

**Training Finder:** Comprehensive database of distance learning course listings

<http://www.train.org/DesktopShell.aspx>

**The MMWR Continuing Education Program:**

<http://www.cdc.gov/mmwr>

**MPH Kansas:** <http://mph.kumc.edu>

**National Library of Medicine –**

<http://www.nlm.nih.gov>

**CDC BT Training -**

<http://www.bt.cdc.gov/training/index.asp>

**The Illinois Public Health Preparedness Center:** <http://www.uic.edu/sph/prepare>

**Heartland Center for Public Health Preparedness:**

[http://www.slu.edu/centers/heartland/programs\\_public.htm](http://www.slu.edu/centers/heartland/programs_public.htm)

**Centers for Public Health Preparedness:**

<http://www.phppo.cdc.gov/owpp/CPHPLocations.aspx>

**Public Health Training Centers:**

<http://bhpr.hrsa.gov/publichealth/phtc.htm>

**Other Public Health Workforce Development Centers:**

<http://www.phppo.cdc.gov/owpp/resources.asp>

**Public Health Workforce Competencies**

**Bioterrorism and Emergency Readiness Competencies for all Public Health Workers:**

<http://www.nursing.hs.columbia.edu/institute-centers/chphsr/btcomps.html>

**Competencies Feedback Project by the Council on Linkages Between Academia and Public Health Practice.**

<http://www.trainingfinder.org/competencies/index.htm>

**Local Health Section  
Office of Local & Rural Health**

<p>Shirley Orr Director, Local Health 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-7100 Cell phone –316-250-6940 Fax number 785-296-1231 E-mail address – <a href="mailto:sorr@kdhe.state.ks.us">sorr@kdhe.state.ks.us</a></p>	<p>Jerry Tenbrink Bioterrorism Training Coordinator 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-291-3241 Fax number – 785-296-1231 E-mail address – <a href="mailto:jtenbrink@kdhe.state.ks.us">jtenbrink@kdhe.state.ks.us</a></p>
<p>Linda Frazier PH Workforce Development Coordinator/DLC 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-296-3641 Cell phone – 785-231-4504 Fax number – 785-296-1231 E-mail address – <a href="mailto:lfrazier@kdhe.state.ks.us">lfrazier@kdhe.state.ks.us</a></p>	<p>Debbie Whitmer PH Nurse Specialist 2501-D Market Place Salina, KS 67401-7699 Office phone –785-827-9639 Cell phone – 785-452-5986 Fax number – 785-827-1544 Email address – <a href="mailto:dwhitmer@kdhe.state.ks.us">dwhitmer@kdhe.state.ks.us</a></p>
<p>Anita Hodge PH Nurse Specialist 1000 SW Jackson, Suite 340 Topeka, KS 66612-1365 Office phone – 785-368-8110 Cell phone – 785-231-4357 Fax number - 785-296-1231 E-mail address – <a href="mailto:ahodge@kdhe.state.ks.us">ahodge@kdhe.state.ks.us</a></p>	<p>Jon Anderson PH Nurse Specialist 1500 W. 7<sup>th</sup> Chanute, KS 66720-9701 Office phone – 620-431-2390 Cell phone 785-231-9828 Fax number – 620-431-1211 E-mail address – <a href="mailto:janderso@kdhe.state.ks.us">janderso@kdhe.state.ks.us</a></p>